

POSITION

INITIALS

ID NO.

DATE

**FEE DETERMINATION**  
**O.I.P.E. CLASSIFIER**  
**FORMALITY REVIEW**  
**RESPONSE FORMALITY REVIEW**

Zm 927  
M 825  
04/24/01  
7/17/01

**INDEX OF CLAIMS**

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
- (Through numeral)	Canceled	A	Appeal
:	Restricted	O	Objected

Claim	Date
1	9/27/01
2	6/27/01
3	6/27/01
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22	✓ ✓
23	N
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26	✓ ✓
27	N
28	N
29	N
30	✓ ✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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